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THE CITY HOSPITAL QUESTION
AND
A REPLY TO BULLETIN OF BOARD
OF TRUSTEES OF UNIVERSITY
OF LOUISVILLE.



—ISSUED BY—

LOUISVILLE MEDICAL CLUB
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THE CITY HOSPITAL QUESTION.

IT IS a question of efficiency and not of privilege ; but it is just as important to have *efficiency in the profession* as it is to have it in the Hospital.

Every public institution including the courts, public schools, parks, police, fire department, etc., is open for the full and equal benefit of all, except the Louisville City Hospital. This is open to a few favored doctors, who mainly are in the Medical College, and their non-resident, non-tax paying students, to the exclusion of the majority of doctors who as tax payers are helping foot the bill, but are denied its educational benefits.

The inmates for whom this hospital was built, are used for teaching medical students and therefore must submit to many otherwise unnecessary examinations. Attempts are being made to prove the opposite, but those who really understand the conditons know the emptiness of these claims. Read the catalogue of the Medical Department 1914-15 and judge for yourself, pages 19, 20, 21, 32, 33, 36, 37.

The extra examinations are made, not for the benefit of the patient, but for the benefit of the students. To make these examinations, means exposing these people for whom the hospital was built, to discomforts, disagreeable exposures, and, in some instances to dangers.

Therefore, it is entirely justifiable to say that the community was not fairly dealt with when the hospital was annexed to the Medical College, or the Medical College engrafted upon the hospital. Efforts are being made to make it appear that the college is an advantage to the hospital. We deny this. The real truth is, the college needs the hospital, but the hospital does not need the college.

It must not be forgotten that when first voted upon, the Hospital Bond Issue was defeated because it did not provide for non-partisan board. This makes it certain that the Bond Issue would never have been carried if it had been known that the hospital, that was to be built for the poor, would be used for the college. A poor citizen who goes into the hospital must leave his doctor outside and accept what is given him. This is frequently an interne, who may or may not be under a staff and who a few weeks or months ago was a medical student. This patient's doctor may be a man of experience and recognized ability, and a tax payer, but is denied the treatment of his sick friend or even help conduct the case. It has been said that the Medical College is a City institution and the hospital is a City institution, and therefore it was proper to turn the hospital over to the Medical College. So are the courts, public schools, etc., City institutions, but they are open to all under fair and equal conditions, except the City Hospital.

Is the City of Louisville a small clique of individuals working for their own advancement at the expense of the majority, or is it the whole body politic? If by the City of Louisville we mean the whole body politic, it is reasonable to show that this hospital is not used to its fullest degree for the City, since it neither fulfills the wishes nor serves the interests of the majority, but serves the favorite few at the majority's expense. It has been said that the hospital has always been used by the colleges. This is partly true, but distinctly misleading. First, formerly there were six medical colleges instead of one as at present. The aggregate faculties of these six colleges represented about one half of the entire profession instead of a small minority of clinical doctors as at present. Second, instead of the college actually appropriating a large part of the hospital as at present, they simply delivered lectures in a lecture room twice weekly. At present the school is as inseparable from the hospital as the bark is from the tree.

We are not asking for the whole hospital, altho we are numerically about ten times stronger than the school men. We are willing to abide by half of the hospital, and we want this half, not as a gratuity, but as a right. We are not asking for benevolence, we are asking for justice, and when we secure justice we will have no need of benevolence.

It is an educational question, so far as doctors and school is concerned and the educational advantages are no less educational when conferred on graduates or doctors, than when conferred on under-graduates or medical students. Since the graduates or doctors are permanent citizens and tax payers, we may be justly pardoned for insisting upon at least as much right as is accorded non-resident non-tax paying medical students. To deny the remainder of the profession the educational advantages of the hospital means class legislation and the formation of a medical aristocracy whose aim will sooner or later mean a modified form of medical peonage.

That one half of the hospital is more than sufficient has been referred to on different occasions and is further proven by the fact that the University of Michigan is able to maintain the rank of "A plus" above the local school, altho it has considerably less hospital advantages than are afforded by one half of our hospital.

The division of the hospital into a school and non-school, half would enable the introduction of team work as it is being carried out in other city hospitals to the patient's advantage. One staff could supplant the other in emergencies instead of delegating it to internes. It would not add a cent of expense to the citizens, but would enable the non-school doctors to keep abreast of the progress in their calling, thus giving the tax payer, better service. As it is, non-school doctors fall behind because the educational advantages are monopolized by their own Alma Mater.

It cannot be said that it will not work, because it has been working in all private infirmaries for years. If it does not work in the City Hospital, it is only because the whole management of the City Hospital is fundamentally faulty.

It is preposterous to say that it invites incapable doctors, as any doctor who has the right to practice in the community, should

have the right to practice in the community's hospital. If he is incapable of practicing in the community's hospital, he should be eliminated from practicing in the community. Who graduated these doctors, but the same University?

The sick poor in the hospital should be protected, but the rich and the middle class not in the hospital have the same right to be protected. If a doctor who may be a little deficient has had some of the educational advantages of the hospital, he may cease to be deficient.

It will be interesting for the tax payer to know how much expense the presence of the school adds to the running expense of the hospital. It is my belief that if not now it will in the future run into the thousands each year, making so much tribute levied on the tax payer. Should this be the case it would do more good if this money were added to the academic department, which does a real public service.

It is well to emphasize here that it is the gravest mistake to think that this is a doctors' fight and I am pleased to say that the citizens are beginning to realize this. It is quite proper that the doctors, who know the situation best, should begin it, direct it, and help provide the remedy. The real sufferers from inefficient doctors are the citizens, and these are not confined to the poorer classes. We are endeavoring to elevate and improve the profession. Our work is the highest form of constructive labor. Conditions change and with these changes men must change also. Modern medicine is the work of the last twenty-five years and indications are that the rate of progress will even be accelerated. In view of this you must provide doctors with opportunities just as you provide medical students with opportunities; the one to acquire what they need to reach the goal, and the other to help them hold what they have, adding the new from time to time. In short, a permanent post graduate school. Then they can do their full duty to the families they attend. Thus you see it is not a doctors' fight, but a struggle that has behind it the interests of humanity.

CRITICISM OF UNIVERSITY BULLETIN.

The bulletin recently circulated by the University of Louisville was either written by one who knew practically nothing about the situation, or it represents a most unjust and undignified statement. Its opening paragraph is largely personal and the remainder if not mainly misleading, is certainly not a frank discussion of the issue. Before discussing the same I wish to reiterate that I was a member of the Louisville Medical College for a number of years, but voluntarily resigned. I have not the remotest desire to return and am willing to serve, or equally willing to waive any claim to service in the hospital, so personally I am not asking for anything.

"Now as to the opening statement considered seriatim:

"A small group of doctors, using the name of a medical organization created by them for that purpose, have been seeking to in-

duce citizens of Louisville to support them in an attempt to secure for themselves certain privileges at the City Hospital. Since they rely upon statements wholly misleading as to the nature and results of the present plan for professional management of the Hospital and are not clear as to what they propose themselves, the Board of Trustees of the University of Louisville, who have no personal end to serve in the matter, but are only seeking to discharge a public duty with fairness to all, have judged it the right of the people of Louisville to have from them a plain statement of the reasons for the adoption of the present plan of hospital management. In this way only can well-meaning citizens and organizations be put on their guard against an attempt to secure their support for a movement that would mean a return to the unsatisfactory unorganized conditions that marked the history of the old City Hospital."

In the early part of 1913 a movement began for justice in the still unfinished hospital. A petition was circulated only among doctors asking for a square deal for all. Altho the canvass was incomplete, no difficulty was experienced in securing three hundred signatures. The fact that it was incomplete and the ease with which these signatures were obtained, entirely justify the conclusion that a complete canvass would have resulted in over four hundred names. These names were filed with the Board of Public Safety in two installments, 200 in one installment and 100 in the other installment. Upon this fact we based our right to speak of four hundred non-school men as opposed to forty school men, meaning clinical men. Later, the moving spirits organized a medical society, called the Louisville Medical Club, and altho we had not a few ill wishers we succeeded to a paid up membership the first year of one hundred and twenty-six men or more men than are connected with the entire University of Louisville. You see therefore the shallowness of the statement of the small group of doctors. The Louisville Medical Club has as one of its objects, we are proud to say, in a measure protecting these men from the ravenous appetite of their dear old Alma Mater. It has other worthy aims, among which might be mentioned the inauguration of a lecture course by securing men of prominence from other cities. It has no pay roll and its dues are the most modest of any medical society in the city. This with a view of working the least hardship on those not yet established and for whom it had an especial aim and we feel that it deserves their unanimous support. We have our enemies. Recently an anonymous letter was written using our name. It was dealt with by condemnation thru the press and the soliciting of information leading to the identification of the writer. More recently a lecturer brought here at the instance of one of our members, was interfered with and the profession lost the message with which this man bore.

In the summer of 1913, the President of the Louisville Medical Club conveyed an invitation coming from another Medical Society of which he was also a member to the American Medical Association meeting in St. Paul, inviting them to meet in Louisville in 1914.

When he finished making an eloquent appeal in behalf of Louisville, a letter from Louisville discouraging the American Medical Association from accepting, was already on file.

This letter effectually killed Louisville, and I am informed by the gentleman who conveyed the invitation that practically the same men who signed this letter are prominent among those opposed to a square deal at the City Hospital.

The Commercial Club and other civic bodies might do the city a real service by carefully investigating this incident. If Louisville could take care of the Sangerfaest, it could take care of the American Medical Association. The American Medical Association would have brought thousands here.

If the merchants of Louisville are willing to endorse by their passive attitude the denial of one-half of the educational advantages of this Hospital to their home profession, these merchants in the future forfeit all right to claims on the patronage of the citizens of Louisville. It is at least as important to retain the educational advantages as it is to retain the commercial advantages.

I will not waste time over these performances, but will submit for judgment the names and subjects of those we brought here in our work for betterment.

Prof. Martin Fisher, University Cincinnati, Brights Disease; Dr. Joseph A. Capps, Chicago, Study of Pleural Pains; Prof. Burton D. Myers, University Indiana, Normal Position of Stomach; Prof. A. G. Pohlmann, University of St. Louis, Visceroptosis; Prof. Wm. Seaman, Bainbridge, N. Y., Polyclinic Intestinal Stasis. All of these lectures were delivered on regular Friday meeting nights, except the last, which was a special meeting to suit the convenience of the speaker, Thursday, October 29th, 1914.

All of these men brought light in their messages and all of these meetings were duly advertised and the entire profession cordially invited. The public might be interested to know what the University has done in this field. But after all, why do you sneeringly say "a small group of doctors?" This is not a question of numbers. It is a question of principle and nearly every truth was once believed by only the minority. Even the great British Empire opposed the colonies when they fought for exactly what we are struggling for "No Taxation Without Representation." Since this is a public question that affects humanity, may we ask you to kindly inform the public of the statements you claim we made that are misleading? What right have you to say that they are not clear as to what they propose themselves? You could not possibly have known what others are ready to propose when you took that liberty. If we receive half the support that you have had we feel that with our plans we will have no more than one Grand Jury to reprimand us and one Woman's Visiting Committee report that so far has found its way into oblivion, which is your record for the first ten months. Do you think you can serve the public with fairness, as you state, when you are so unfamiliar with the other side of the question? Why have you remained silent for almost two years and now think it proper to come out? You speak of the unsatisfactory and unorganized condition of

the old City Hospital, but you remain silent on the fact that the medical faculties of the five schools, omitting the Homeopathic, were in control of the old hospital for ten months out of the twelve and therefore were responsible for ten-twelfths of the abuses in the old hospital. Since the present school is an amalgamation of the five former schools, you have virtually the same men, and if they failed in their duties before, what guarantee has the public that they will not fail again? You say, "it is impossible for all doctors to be on the staff at once." It is safe to say that no one, not even yourself, ever seriously thought that all doctors wanted to be on the staff at once, and if you know the hospital's capacity, you know that that is impossible, even if they wanted to do so. Therefore why make such statements? We do not object to a teaching hospital properly conducted, any more than we object to teaching public schools properly conducted, but we do object to the teaching hospital restricting its educational advantages to a few resident doctors and their non-resident, non-tax paying students while the resident tax paying doctors, are deteriorating because their Alma Mater is unwilling to share this hospital on a just basis with its own graduates. In your platitude on humanity you speak of "research" but we all know the University of Louisville has never been guilty of doing any research work worthy of the name.

But why deny others the equal right to do research? You cannot possibly prove that others are not equally capable and the example of Doctor Ephraim McDowell and others is a sublime proof that the Universities are not the sole research centres.

Since the average working man finds no trouble in understanding the real issue, it made it difficult to believe that with your intelligence you could entirely miss it. Permit me to put it simply and plainly. Suppose the Board of Education which is maintained through a general taxation and which represents a teaching or educational institution for the equal benefit of all, should only permit the educational advantages of the public schools to be enjoyed by the residents of Third and Fourth Avenues? When shown their injustice they refuse to see it and suavely answer, "We are doing our best." Do you think that the Board is right and that its "best" should prevail, or do you think that the Board is wrong and that it and its best should be drummed out of any American community in disgust? This is the principle involved in the controversy. Settle this justly and the controversy ends. As the other points either settle themselves automatically or can easily be adjusted.

There was nothing said in the Bond Issue that the City Hospital should be built for the school and using it selfishly is not using it for humanity. It has educational advantages and since it is maintained thru the taxation of all and not by special taxation of a few, it is the simplest kind of justice to permit all to enjoy these educational advantages and the most infamous injustice to tax all, but deny some representation.

You owe it to this community to face this issue directly and discuss it relevantly and not dodge. A University should be a moral force in a community and not a commercial asset.

To be a moral force it must stand for justice, freedom and equality and none of these great principles are in the remotest way to be detected in your attitude towards this issue. The equality of opportunity that sooner or later must prevail thruout the world can least of all be disturbed by an institution that calls itself a University. You can live and let live. You are anxious about the first, but indifferent about the last, altho you are the Alma Mater of these men.

It is the belief of many that the medical school exists, not that teaching is needed, but that advertising is possible, and that we are not alone in this is shown by Meltzer's statement:

"I remember how years ago, a noted surgeon, who was a professor of surgery at one of the best known medical schools said to me: "They pay me a thousand dollars a year. The fools! I would pay them \$5,000 for the professorship; it's worth more than \$25,000 a year to me.'"

S. J. MELTZER.

—Science, Friday, Oct. 30, 1914.

It is not a question of how much you can get out of this hospital, but how much good you can do. When you use twice as much as you need, you are simply wasting half as much as you have. The half that you are wasting is the half that we are struggling for. That half might be used in helping doctors maintain their standard of efficiency.

Your remarks suggest that an attack is being made on the University. It is proper to emphasize that conciliatory measures were first tried and later repeated without results. Allow me to remind you that if the University, or any of its departments, interferes with the rights of others and receives a well merited chastisement for its pains, it has only gotten what it deserves. It is not only the right, but the highest duty of every citizen to offer proper criticism of public institutions and in doing so they are fulfilling the highest duties of citizenship and are not entitled to abuse, however slight, for their efforts.

There is nothing that I know of that has been as damaging to the University as for some of its professors to send their sons elsewhere for their medical education, or the attitude of the University itself towards the doctors not connected with the school. The objections raised against them suggest incompetence. What apology have you to offer for inflicting them upon the community? What could be more infamous than for you to stand in their way in their efforts to improve their inefficiency? Nothing could place you in a more ungracious light than to take their tuition fees, encourage them to give their time and after they have graduated, impress upon them your stigma of disapproval. To any thinking individual the real damage received has come from the inside and not the outside. A student who remains with you after realizing such truths, is sorely pressed indeed. You no doubt have received much advice from your colleagues, some of which I suspect was very bad and had behind it a self interest. May I call

your attention to some facts that are of most vital importance to you, namely: Do you realize that the Medical Department of any university, if properly conducted, is its most expensive department? Apart from the hospital, according to H. S. Pritchett, it requires one hundred thousand dollars, and according to Victor C. Vaughn it requires two hundred thousand dollars annually. It costs Columbia University six hundred dollars to educate each medical student per session, teaching alone, to which the student thru his fees contributes two hundred and fifty dollars, leaving a deficit for each student of three hundred and fifty dollars, which Columbia must make up. In Louisville the fees are about one hundred and fifty dollars. Therefore the deficit would even be greater if Columbia standards prevail. Why should Louisville think for a moment that she is called upon to go deep into her pocket to educate a few non-resident medical students when there are a sufficient number of properly endowed medical colleges thruout the country to do the job? All this time the Academic Department which we are in need of and is doing good work remains in a state of chronic inanition. Some of the very first universities are without medical departments, such as Bryn Mawr and Princeton. And others have discarded them. There are five times as many doctors as are needed, and the law of supply and demand operates with the same accuracy in the production of doctors, as it does of kitchen tables.

Over production means demoralization and demoralization in medicine means disaster to some individual. Read Norman Barnesby, M. D., "Medical Chaos and Crime." How much better it would be in every way except so far as the interests of the medical faculty is concerned, and these interests only commercial, as their scientific interests are untouched, to abolish this department. Rid yourself of what has impeded and will continue to impede the development of your Academic Department which is needed and doing good work. You speak of the decision of the Supreme Court in medicine. Permit me to remind you that there are a number of questions concerning medical education, about which this Supreme Court is very much in doubt; but there is one question about which this Supreme Court is not in doubt and that is your standing before the State Examining Boards, which is third from the bottom, with 21.4 per cent of failures against you. Will that help the Academic Department? Prominent men visiting here have been asked to say a good word, but the important feature of all this is that none of these men have touched the issue. All may be classed as character witnesses. We reserve the right to also introduce the testimony of others. These however are not character witnesses, but discuss the issue.

The editor of "**American Medicine**," September, 1908, writes:

"The hospital problem is bound to call in the near future for serious attention on the part of thinking medical men. No man can deny that the development of medical eleemosynary institutions has been largely responsible for the progress of medical and surgical science. But coincidental with the growth of the hospital idea, grave dangers to the rank and file of the medical profession

have appeared. In most communities wherever one finds a hospital, there also will one find a small clique of medical men enjoying especial advantages and privileges by virtue of their hospital connection. Their less fortunate and influential colleagues are denied these advantages, and are proportionately handicapped in the practice of their profession. Therefore if hospitals have not fulfilled their most complete function in any community the reason can usually be found in rules which confer special advantages on a few medical men and rigorously deny any privilege to those outside the 'charmed circle.'

"The ideal hospital system, and one that sooner or later must be adopted, is that which offers to every medical man the opportunity of placing his patients in any hospital he or they may elect, there to treat them with all the freedom that is his as a legally qualified practitioner of medicine. . . . Hospitals will then become in reality what they were originally intended to be, institutions solely for the use and welfare of the public, and not institutions for the promotion of private gain, professional or otherwise, as under present conditions is too often the case."

HOSPITAL REFORM IN GREAT BRITAIN.

Journal Amer. Med. Asso. Vol. LXI, P. 1651.

"Criticisms of the present situation are that the existing hospitals are becoming more and more centralized, that they are limited principally to the larger cities and that the number of physicians who can secure the necessary training and experience as members of the staff is limited. The result is that the practitioner who locates at a distance from a properly equipped hospital not only does not increase his knowledge and skill by experience, but does not even retain what he has, on account of lack of opportunity to use it. The result is that, with the exception of those men whose location or ability secures them appointments on the staff of some hospital, physicians soon become rusty in their knowledge and limited in their usefulness."

BULLETIN VI, CARNEGIE FOUNDATION.

"An American graduate in medicine can, for the asking, obtain the entree to the clinics of Berlin, Vienna, or Munich; but in his own country, the doors of the hospital are closed in his face!*" It is not a pleasant task to disclose the reason back of this unwise policy. To some extent, at least, it is due to the fact that hospital physicians engrossed in practice are unwilling that their prestige should be lessened by the scientific achievements of younger men working in their wards. The laymen in control of hospitals could easily break up this selfish and unprogressive attitude, by insisting that hospital opportunities do not exist for the professional benefit of the visiting staff."—H. S. PRITCHETT (Bulletin VI).

* Bold type my own.

CONTROL OF THE CINCINNATI HOSPITAL.

Cincinnati Medical News, February 19, 1914.

We want to take this occasion to protest vigorously against the plan giving the hospital directorate and the medical department the arbitrary power to regulate the affairs of the hospital for the sole use of the Ohio-Miami Medical College. The dean, who aspires to be the irremovable head of the board, with perpetual membership thereon, and who is chairman of the building commission having the hospital in charge, is modesty personified. But even he ought to suspect that the minority which he represents ought to accord certain just and proper privileges to the majority. He ought to know that the question of control will not be settled until it is settled right. And his friends would do him no better service than to explain to him that to perpetuate the influence of the coterie now in control of medical matters will simply accelerate the retrogression which medical teaching and, in fact, which all things medical have experienced in this fair city of ours. The seven hundred independent physicians of this community ask for the representation on the hospital staff.

The medicine of to-day and especially that of the future, is so highly developed that it is as necessary to have a hospital to maintain the medical education, as it is to acquire it. To do one and omit the other is making the entire performance the sheerest form of folly.

LOUISVILLE MEDICAL CLUB, Incorporated,

By August Schachner, Chairman Press Division.

